

MANUALLY SIGNED

SEC Potential persons who are to respond to the collection of info

1972 contained in this form are not required to respond unless the

(6-02) currently valid OMB control number.



ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2005
Estimated average burden hours per response... 1

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

	PROCESSED
	OCT 0 9 2002
SEC US	E ONLY THOMSOM
Prefix	Serial FINANCIAL
DATE R	ECEIVED

Name of Offering ([] check if this is an amendment and name has changed, and indicate change.)

\$1,500,000 10% Subordinated Convertible Debentures With 30% Common Stock or Series A Preferred Stock Warrants @ \$.001 per Share

Filing Under (Check box(es) that [] Rule 504 [] Rule 505 [x] Rule 506 [] Section 4(6) [] ULOE apply):

Type of Filing: [x] New Filing [] Amendment

A. BASIC IDENTIFICATION DATA

1. Enter the information requeste	ed about the issuer
Name of Issuer ([] check if this	is an amendment and name has changed, and indicate change.)
Felton International, Inc.	
Address of Executive Offices Telephone Number (Including A	(Number and Street, City, State, Zip Code) rea Code)
8210 Marshall Drive, Lenexa, Ka	nsas 66214
Address of Principal Business O Telephone Number (Including Ar (if different from Executive Office	
Same	
Brief Description of Business	
Developing and commercializing applications	needle-free jet injection devices for animal and human
Type of Business Organization	
[x] corporation	[] limited partnership, already formed [] other (please specify):
[] business trust	[] limited partnership, to be formed
	Month Year
Actual or Estimated Date of Inco	rporation or Organization: [09] [2000] [x] Actual [] Estimated
Jurisdiction of Incorporation or O	rganization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) [K][S]

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that [x] Promoter [x] Apply:	Beneficial Owner	[x] Executive Officer	[x] Director []	General and/o Managing Partner
Full Name (Last name first, if individual Alan F. Felton)			acticant activate and a state of the state o
Business or Residence Address (Numb 8210 Marshall Dr., Lenexa, KS 66214	per and Street,	City, State, Zip Code)	NAME OF THE PROPERTY OF THE PR
Check Box(es) that [x] Promoter [x] Apply:] Beneficial Owner	[x] Executive Officer	[] Director []	General and/or Managing Partner
Full Name (Last name first, if individual Pamela J. Felton)			······
Business or Residence Address (Numb 8210 Marshall Dr., Lenexa, KS 66214	per and Street,	City, State, Zip Code)	
Check Box(es) that []Promoter[]I Apply:	Beneficial Owner	[x] Executive Officer		General and/or Managing Partner
Full Name (Last name first, if individual James R. Smith)			
Business or Residence Address (Numb 8210 Marshall Dr., Lenexa, KS 66214	per and Street,	City, State, Zip Code)	

Check Box(es) that Apply:	[] Promoter [x]	Beneficial Owner	[] Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last nam Bi-State Investment)		
Business or Residen 9875 Widmer Rd., Lo		er and Street	; City, State, Zip Cod	de)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

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	of Asso		Broker o	r Dealer	**************************************		***************************************					MAN
States	s in Whi	ch Pers	on Lister	Has Sol	icited or	Intends	to Solicit	Purcha	sers			
(Chec	ck "All	States'	or chec	k indivi	dual Sta	ates)	•••••			[] All S	tates
[AL]	[AK]	[AZ]	[AR]	[xCA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[xIL]	[IN]	[IA]	[xKS]	[xKY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[xMO]
[MT]	[NE]	[NV]	[NH]	[xNJ]	[NM]	[xNY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	ſUΤΊ	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees	[]	\$-O -
Printing and Engraving Costs	[]	\$-0-
Legal Fees	[x]	\$30,000
Accounting Fees	[]	\$-0-
Engineering Fees	[]	\$-0-
Sales Commissions (specify finders' fees separately)	[]	\$-0-
Other Expenses (identify) finders' fees	[x]	\$75,000
Total	[]	\$105,000

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."

\$1,395,000

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

Salaries and fees Purchase of real estate	Payments to Officers, Directors, & Affiliates [x] \$150,000	Payments To Others [x] \$129,000 [] \$-0-
Purchase, rental or leasing and installation of machinery and equipment	[]\$-0-	[]\$-0-
Construction or leasing of plant buildings and facilities	[]\$-0-	[]\$-0-
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[]\$-0-	[]\$-0-
Repayment of indebtedness	[]\$-0-	[]\$-0-
Working capital	[]\$-0-	[x] \$1,116,000
Other (specify):	[]\$-0-	[]\$-0-
	[]\$-0-	[]\$-0-
Column Totals	[]\$-0-	[]\$-0-
Total Payments Listed (column totals added)	[×]\$	1,395,000

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under <u>Rule 505</u>, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of <u>Rule 502</u>.

Issuer (Print or Type)	Signature	Date
Felton International, Inc.	I he N. Kum	September <u>3</u> , 2002
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Philip N. Krause	Vice President, General Counsel	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)